Factor Association Related to Husband's Support Behavior in the Cervical Cancer Prevention Based on Theory of Planned Behavior

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Abstract---Husband's support is an important interpersonal factor in the cervical cancer prevention performed by women, however, there are still many women who are reluctant to do this early detection so that it need the understanding related to the factor of husband's support behavior to maximize the prevention effort of cervical cancer. This study aims to analyze the factors related to husband's support behavior in the cervical cancer prevention based on Theory of Planned Behavior. This study used descriptive analytic with cross sectional design. The samples were 102 husbands who were childbearing couples taken using the cluster sampling technique. Variable of this study was the husband's attitude, husband's subjective norm, husband's perceived behavioral control, husband's intention and husband's support behavior in the cervical cancer prevention. The data analysis was performed using Spearman's Rho with significance level of ≤ 0.05. The result showed a significant relationship between attitude with intention ($p = 0,000$; $r = 0,377$), perceived behavioral control with intention ($p = 0,003$; $r = 0,289$) and intention with husband's support behavior in cervical cancer prevention ($p = 0,000$; $r = 0.431$). Subjective norm with intention indicates an insignificant relationship ($p = 0.059$; $r = 0.188$). The positive attitude and perception of behavioral control in the Theory of Planned Behavior affect the support of husband who encourages high intention so that it has implication for the creation of husband's support behavior in the prevention of cervical cancer.

Keyword---Cervical Cancer Prevention, Husband's Support, TPB.

I. INTRODUCTION

Cervical cancer is a deadly disease that has taken many victims, especially in developing countries (Sherris et al., 2004). The data from the *International Agency for Research on Cancer (IARC)* in 2012 showed that the percentage of new cases of cervical cancer was 14% and the percentage of death from cervical cancer was 7%. According to WHO in 2012, the new cases of cervical cancer were found as many as 530,000 cases and the death from cervical cancer as many as 270,000 cases, 90% of which occurred in developing countries. Indonesia is a developing country with the highest rates of cervical cancer cases in Asia (Domingo et al., 2008). Cervical cancer occupies the highest position in Indonesia in 2013that was 0.8% with an estimated number of patients with cervical cancer of 98,692 women (Data and RI, 2015). The effort to minimize the spread of cervical cancer is to carry out an early examination, especially if there is social support.

Early prevention of cervical cancer is very possible to do, however,the handling is still not too optimal, especially in developing countries(Sherris et al., 2004). Early detection is needed to optimize the effortof cervical cancer preventionsuch carried out by the government in one of the city in the East Java province, Indonesia. East Java Province occupies the third highest position in Indonesia with the number of cervical cancersis 21,313 residents (Kemenkes, 2015). A preliminary study conducted on April 7, 2017 at Dinas Kesehatan Kabupaten Nganjuk, Indonesia recorded 20 Puskesmas in Kabupaten Nganjuk, Indonesia. From 165,979 women aged around 30-49 years old in Kabupaten Nganjuk, Indonesia who did the early detection of cervical cancer by IVA in 2016 as many as 2931 people (1.77%) and found from the examination as many as 40 people (1.36%) showed IVA positive which leads to the incidence of cervical cancer. The highest contributor to participation of the early detection as many as 772 in 2016 was the Puskesmas of Kecamatan Nganjuk, Indonesia. The 60 of them came from Kelurahan Kauman, Nganjuk, Indonesia, where from the 15 Kelurahan that were working in PuskesmasKecamatan Nganjuk, Kelurahan Kauman, Indonesia had an average participation rate from the entire Kelurahan.

The effort that has been carried outby health worker for married women is to provide counseling about cervical cancer and ease the facilities for early detection of cervical cancer. There are various factors that inhibit the examination of early detection of cervical cancer in women such as shyness (Al-Naggar et al., 2010; Oon et al., 2011) and fear (Farooqui et al., 2013; Kwok et al., 2011), cost factor, especially in the weak economy, experience and motivation, and social support, especially the husband as the closest person considering that the husband's significant role in the behavior of women from the developing countries(Organization et al., 2006). Previous studies have described husband as a major factor that encourageto carry out the early detection examination(Arulogun and Maxwell, 2012) as well as the causes of limitation in conducting early examination effort due to lack of support (Coffey et al., 2004; Nene et al., 2007).

Husband's support in the prevention of cervical cancer is certainly influenced by factors originating from inside and outside the husband himself. Previous studies have delved the husband's support by using his wife as a subject (e.g (Anggraeni and Benedikta, 2016; Linadi, 2013) and have not delved deeper into the subject of the husband about factors related to husband's support behavior in the prevention of cervical cancer which despite obtaining support from husband, the wife is still reluctant to participate in examination of early detection of cervical cancer (eg Pertiwi and INDRIANI, 2015) so that further studies are needed regarding the connecting factors husband's support toward cervical cancer prevention as measured from the husband's perspective considering the lack of studies especially those conducted in Indonesia.

One of the efforts to deal with the problem of husband support in cervical cancer prevention behavior is to analyze factors related to husband support behavior using *Theory of Planned Behavior (TPB)*. *Theory of Planned Behavior (TPB)* is a theory related to intention and behavior where the behavior displayed by individual arises because of the intention to behave. While the emergence of intention to behave is related to 3 factors: *attitude toward the behaviorals*, *subjective norm* and *perceived behavioral control*(Ajzen, 1991). Theory of Planned Behavior is a superior model of intention and behavior variants compared to other theories such as the health belief model, social cognitive theory, and protection motivation theory, (Conner et al., 2000)which can be used in predicting the cervical cancer screening intention(Roncancio et al., 2013).

This study aims to determine the factors related to the husband's support behavior toward the effortof cervical cancer prevention in Indonesia. The study will evaluate related factors using the Theory of Planned Behavior.

II. METHOD

Study and Sample

Estimated research time was determined by researchers for one month starting from June and ending in July 2017. This study used descriptive study with *cross sectional* approach. The population of this study was husband who was EFAs, which amount to 682 people. Sampling used the *probability samplingclustersampling* type. This study only used inclusion criteria with the following criteria: (1) Men of childbearing age between 20-49 years old, (2) Men who live with their wives and (3) Men who have been married for more than 2 years, from the entire population that met the inclusion criteria, there were 102 respondents.

Measure

Demographic tools: Demographic data in this study include age, gender, education, occupation, religion, ethnicity, income, knowledge, experiences and information media exposure.

Observation tool: Variable used in this study was husband's attitude, husband's subjective norm, perception of husband's behavior control, husband's intention and husband's support behavior in the prevention of cervical cancer. The scale used was a Likert scale.

• Attitude: The attitude measurement instrument in this study used an attitude questionnaire adopted from Laili (Laili, 2016) and Sari (Sari, 2013). Researchers modified the statement and content of all items to adjust with the theme of the study conducted, namely the attitude of husband's support in the prevention of cervical cancer.

• Subjective norm: Subjective norm measurement instrument in this study used a questionnaire adopted from Komariah (Komariah, 2016) and Laili (Laili, 2016). Researchers modified the statement and content of all items to adjust with the related parties, where these parties are wife, family, peers, neighbor or health worker.

• Behavioral control perception: Behavioral control perception measurement instrumentusing questionnaire adopted from Laili (Laili, 2016) , Rafidah and Wibowo (Rafidah and Wibowo, 2012)and Sari (Sari, 2013). Researchers modified the statement and content of all items to adjust the study theme conducted, namely the perception of husband's behavior control about support behavior in cervical cancer prevention.

• Intention: Intensity measurement instrument used questionnaire adopted from Komariah(Komariah, 2016), Laili (Laili, 2016) and Sari (Sari, 2013). Researchers modified the content or topic of all items or statement number to match the theme of the study being conducted, namely measuring the value of the husband intention in supporting cervical cancer prevention behavior.

• Behavior: The measurement of husband's behavior used questionnaire adopted from the Laili observation sheet (Laili, 2016) which was then applied to 10 assessment categories.

Procedure

The implementation phase was carried out for 10 days which was 5 days for filling out the first questionnaire and the next 5 days filling out the second questionnaire and it was found that 25-26 respondents fill out the questionnaire every day. Visiting to each RT were assisted by 1-2 cadres and conducted briefing previously. This was carried out so that the researcher assistant was better prepared if the respondent did not understand the questions from the

questionnaire given. After the questionnaire was collected, the questionnaire wassubmittedto the researcher which was then *coding* by the researchers and entered into a tabulation to be analyzed using *Spearman's Rho* until a conclusion was drawn from the study result.

Ethical Clearance

This study has obtained the feasibility study of ethics at di Komisi Etik Penelitian Kesehatan Fakultas Keperawatan Universitas Airlangga with No. 426-KEPK.

Data analysis

Analysis of the data used was using the Spearman's Rho statistical test. The scale of the data used in the questionnaire was the ordinal scale. The data obtained was then collected and analyzed using bivariate analysis with the Spearman's Rho statistical test to determine the relationship between the two dependent and independent variables, if the statistical calculation result was p, 0.05 it meant H0 was rejected and hypothesis (H1) was accepted. Statistical test by using the Windows SPSS program and presented in tabular form.

III. RESULT

Characteristic of respondent

Researchers will describe the demographic characteristic of 102 respondents which include age, education, occupation, religion, ethnicity, income, knowledge, experiences and media exposure as follows:

Table 1: General Data Characteristic of respondents' husband support behavior in the prevention of cervical cancer atKelurahan Kauman Nganjuk, Indonesia in July 2017.

Respondent Characteristic	F	%
Age		
17-25 years old	1	1
26-35 years old	42	41.2
36-45 years old	38	37.3
46-55 years old	21	20.6
Total	102	100
Education		
Graduated from Elementary School or equivalent	3	2.9
Graduated from Junior HighSchool or equivalent	13	12.7
Graduated from Senior High School or equivalent	61	59.8
University or College	25	24.5
Total	102	100

Occupation		
Civil Servant	17	16.7
Private	37	36.3
Enterpreneur	48	47.1
Total	102	100
Income		
<UMR= <Rp 1.527.410,-	20	19.6
UMR= Rp 1.527.410,-	34	33.3
>UMR= >Rp 1.527.410,-	48	47.1
Total	102	100

Table 1 informed that respondent in this study was dominated by husband aged of 26-35 years old, husband who graduated from Senior High School degree or equivalent, husband whowas an enterpreneur, husband with Islamic religion, husband with Javanese ethnicity, husband with income of > UMR Nganjuk, Indonesia.

Table 2: Respondent Information related the Husband's Support Behavior in the Cervical Cancer Prevention atKelurahan Kauman Nganjuk, Indonesia in July 2017.

Respondent Information	**F**	**%**
Knowledgement		
Know the Cervical Cancer	36	35.3
Ever Heard the Cervical Cancer	60	58.8
Do not Know the Cervical Cancer	6	5.9
Total	102	100
Experiences		
Family experienced Cervical Cancer	1	1
Neighbor experienced Cervical Cancer	4	3.9
Friend experienced Cervical Cancer	8	7.8
Etc.:Artist	83	81.4
No	6	5.9

Total	102	100
Media Exposure		
Internet/TV	80	78.4
Magazine/Newspaper	10	9.8
Banner on the street	1	1
Counseling	3	2.9
Etc.:Flyer	2	2
No	6	5.9
Total	102	100

Table 2 showed that the dominant knowledge that the respondent has was limited to their husbands having heard about cervical cancer. Respondent's experience of cervical cancer was the most dominant, which was obtained from the artists and the dominant source of information used by husband to know about cervical cancer was from the internet and TV.

Attitude, Subjective Norm and Behavioral Control Perceptiontoward Intention

Attitude, subjective norm and perception of behavioral control with intention to support husband's behavior in the prevention of cervical cancer can be seen in table 3 as follows:

Table 3: Cross Tabulation of Attitude and Behavioral Intention of Husband's Support in the Prevention of Cervical Cancer based on Theory of Planned Behavior atKelurahan Kauman Nganjuk, Indonesia in July 2017.

Attitude	Intention				Total	
	Low		High			
	F	%	f	%	∑	%
Negative	34	33,4	19	18,6	53	52
Positive	13	12,7	36	35,3	49	48
Total	47	46,1	55	53,9	102	100

Sperman's RhoTest=0,000

Correlation Coefficient (r) =0,377

Subjective Norm	Intention				Total	
	Low		High			
	F	%	f	%	∑	%
Less	31	30,4	26	25,5	57	55,9

Good	16	15,7	29	28,4	45	44,1
Total	47	46,1	55	53,9	102	100

Sperman's RhoTest=0,059

Behavioral Control Perception	Intention				Total	
	Low		High			
	f	%	f	%	Σ	%
Less	34	33,4	24	23,5	58	56,9
Good	13	12,7	31	30,4	44	43,1
Total	47	46,1	55	53,9	102	100

Sperman's RhoTest=0,003

Correlation Coefficient (r) =0,289

Table 3 showed the result of statistical analysis using the Spearman correlation obtained p value = 0,000 (α≤0,050) which meant that there was a significant relationship between attitude and intention to the husband's support behavior in the prevention of cervical cancer. The Spearman correlation value of 0.377 showed that attitude in providing support have a low and unrelated relationship with intention to the husband's support behavior in the prevention of cervical cancer, this indicatedthat the more positive attitude of respondent the higher the intention to support the prevention of cervical cancer as well as the behavioral control perception showed the result of statistical analysis using the Spearman correlation obtained p value = 0.003 (α≤0.050) which meant there was a significant relationship between the behavioral control perception with the intention to the husband's support behavior in the prevention of cervical cancer. Spearman correlation value of 0.289 showed that the behavioral control perception in providing support has a low and unrelated relationship with the intention to the husband's support behavior in the prevention of cervical cancer, this indicated that the better the behavioral control perception of respondent, the higher the intention to support cervical cancer prevention.

While subjective norm showed the result of statistical analysis using the Spearman correlation obtained p value = 0.059 (α≤0.050) which meant there was no significant relationship between subjective norm and intentiontoward the husband support behavior in the prevention of cervical cancer based on Theory of Planned Behavior. The absence of a significant relationship arisen when a person has less belief because the person who was considered important did not display the expectation that someone wanted to fulfill. People or groups of people who were considered important were couple, family, peers and health worker.

Intention to the Behavior

Intention of husband support behavior in the cervical cancer prevention, cross tabulation between intention and husband's support behavior in cervical cancer prevention can be seen in table 4 as follows:

Table 4: Cross tabulation between intention and support behavior of the husband in the prevention of cervical cancer based on Theory of Planned Behavior.

Intention	Behavior				Total	
	Less		Good			
	F	%	f	%	Σ	%
Low	38	37,3	9	8,8	47	46,1
High	21	20,5	34	33,4	55	53,9
Total	59	57,8	43	42,2	102	100
Sperman's RhoTest=0,000						
Correlation Coefficient (r) =0,431						

Table 4 showed the result of statistical analysis using the Spearman correlation obtained p value = 0,000 ($\alpha \leq 0,050$) which meant there was a significant relationship between intention and husband's support behavior in the prevention of cervical cancer. Spearman correlation value of 0.431 showed that the intention to provide support has a strong enough relationship and in the same direction with the husband's support behavior in the prevention of cervical cancer, this indicated that the higher the intention of the respondent, the better the support behavior inthe cervical cancer prevention.

IV. DISCUSSION

A positive attitude and good behavioral control perception have a significant relationship so that it can increase the intention that implicatedto the behavior of the husband's encouragement in the prevention of cervical cancer. The majority of respondents have a positive attitude. That was a supportive attitude in the prevention of cervical cancer. They considered that supportive attitude was important to bring up the intention to provide support in the prevention of cervical cancer. Attitude was a significant predictor of women's intentions in HPV screening in early detection of cervical cancer (Ogilvie et al., 2016). Based on *Theory of Planned Behavior*, intention was not only influenced by attitude but can also be influenced by subjective norm and behavioral control perception. The majority of respondents have less behavioral control perception followed by low intention. But respondent who had the good behavior control perception followed by high intention also showed the amount with a difference that was not too far. This wasin line with the previous studies showed that behavioral control perception has a positive bond with the intention to *screening*the cervical cancer (Roncancio et al., 2015). Positive attitude and behavioral control perception correlated with the intention where it was a significant predictor in determining the early detection behavior of cervical cancer

(Roncancio et al., 2015). Having a strong enough correlation meant that the husband has a high intention, then, the support behavior displayed by the husband in the prevention of cervical cancer was also getting better.

Someone will have a positive attitude regarding support behavior considering belief is directly proportional to a good attitude (e.g Herzog *et al.*, 2013; Malek *et al.*, 2017). Most respondents have a positive attitude, ie respondent feel appropriate to support the effort of cervical cancer prevention. The attitude of husband in providing support for cervical cancer prevention was influenced by the belief that providing support for prevention of cervical cancer will produce good consequences for himself and his wife. The husband also believes that providing support for cervical cancer prevention will help his wife to be more aware of the risk factors for cervical cancer. However, there were variants regarding the attitude of respondent. Even so, each individual has its own strength which factors more influence the individual's intention, so it is not always individual who have high intention then they have a positive attitude (Ajzen, 2005).

Variation obtained in the attitude, not only lead to positive attitude,it was also relevant to the perception of behavioral control. Behavioral control perception is generally comparable to their intention, but there was respondent who have high intention and have less behavioral control perception. So that was the same with respondent who have good behavioral control perception but has low intention. The existence of this variation response also applied to attitude finding which can occur due to other factors that affectedthe intention such as the subjective norm of the individual. Lack of *control belief* and *perceived power control* of the individual can also affected the control perception of his own behavior in which the perception of behavioral control can lead to the intentionconsidered that *control belief*was the strongest predictor of intention (Davis et al., 2015).

Intention on the support behavior producedthe significant result showing that intention played an important role to the support behavior (e.g (Sarayati, 2016) especially by husband regarding the support of cervical cancer prevention. The majority of respondents have high intention of showing ourselves strong desire and encouragement in giving support in the cervical cancer prevention, even if the intention wasrelated to the behavior of the husband's support in the prevention of cervical cancer mostly showed the low intention and less behavior. Less intention can indicate if the husband actually already has a desire to provide support, but a strong encouragement has not been arisenin the husband himself. In this case, the intention was not yet a behavior while the behavior was a real action taken (Nursalam, 2013). However, most of them showed the high intention to support the prevention of cervical cancer so that good support behavior was manifested.

Theory of Planned Behavior stated that intention was related to the attitude, perception of behavioral control and subjective norm. However, subjective norm showed no correlation between the husband's subjective norm with the husband's intention to provide support in the prevention of cervical cancer. According to Theory of Planned Behavior, subjective normwas based on the existence of beliefs about agreeing or disagreeing from another person or group that was considered important by the individual (normative belief) (Ajzen, 1991).. Most respondents have less subjective norm that indicated the husband feels less influenced by his closest people so that the belief to support in the prevention of cervical cancer did not appear in him. The lack of Involvement of health worker, wife, family and friends caused the subjective norm of the husband in supporting the prevention of cervical cancer was less strong and optimal to show a significant relationship with intention strengthened by the experience gained by respondentwas

from *public figure* so it did not have a direct impact on the respondent. Another factor that caused no significant relationship between subjective norm and intention was that the strength of others towards the respondent in giving *rewards or punishment*was still minimal. Respondent did not get any reward from others who were considered important if they did support in the prevention of cervical cancer so that it impacted on the lack of motivation to support the prevention of cervical cancer.

There were other factors that influence the attitude, subjective norm, intention control perception and support behavior, namely demographic data such as age, education, occupation, income, knowledge, experience and media exposure obtained by respondent. The data obtained showed that respondent who have positive attitude, perception of behavioral control and implementation of support behaviorwas more dominant in the age range of 26-35 than other age ranges because they were likely to be more updated. However, respondent who have subjective normwas more or less dominant in the age range of 26-35 years old. The tendency at the age of 26-35 years oldwas possible because people who were considered important by the husband assumed that if they were young, there was no need to prevent cervical cancer. While respondent aged around 36-54 have a high intention both towards attitude and perception of behavioral control this was due to the possibility of having a more stable level of emotional maturity. Whereas the more dominant level of senior high school education dominated positive attitude and good behavior control perception. Higher education allowed respondent to get more information about cervical cancer than respondent who has low education level. The majority of respondents who have high intention, good behavior, positive attitude and good behavior control perception hasa job as entrepreneur, that was respondent feel that they have more time in supportingtoward the prevention of cervical cancer. Earning less than the minimum wage tend to have high intention and the lack of good behavior, this may arise due to the less assumption from respondent. Then, the role of public figures gave a significant impact on the attitude, behavioral controlperception, subjective norm, and intention as well as behavioral support for cervical cancer prevention.

V. LIMITATION

Limitation in this study was the number of questions on the questionnaire was too much so that it required 2 times the visit time for each respondent, the second visit was done after each cluster has completed filling out the questionnaire on the first visit. Then, clarification was not made by researchers on wives. Then, the selection of respondentwas based on the recommendation of the cadres so that there was a possibility of bias and subjective and research questionnaire modified by the researchers themselves.

VI. CONCLUSION

Based on the analysis of the relationship factor of husband's support toward cervical cancer prevention using the *Theory of Planned Behavior*, then, it obtained the conclusion that positive attitude and behavioral control perception in the *Theory of Planned Behavior* affect the support of husband who encourage high intention so that it has implicated the creation of husband support behavior in the prevention of cervical cancer,it was positive attitude and good behavioral control perception. Only subjective norm indicated no significant of husband's intention and support for cervical cancer prevention. It was recommended to provide socialization regarding the significance of cervical

cancer prevention by involving the active participation of husband's sideto the related parties as well as conducting

furtherstudy on various variables related to the husband's support behavior in the prevention of cervical cancer.

REFERENCES

[1]   Ajzen, I., 2005. Attitudes, personality, and behavior. McGraw-Hill Education (UK).

[2]   Ajzen, I., 1991. The theory of planned behavior. Organ. Behav. Hum. Decis. Process. 50, 179–211.

[3]   Al-Naggar, R.A., Low, W.Y., Isa, Z.M., 2010. Knowledge and barriers towards cervical cancer screening among young women in Malaysia. Asian Pac J Cancer Prev 11, 867–873.

[4]   Anggraeni, F.D., Benedikta, K., 2016. Dukungan Suami Terhadap Deteksi Dini Kanker Serviks Pada Pasangan Usia Subur (PUS) Di Dusun Ngasem Desa Timbulharjo Sewon Bantul Tahun 2016. Media Ilmu Kesehat. 5, 184–192.

[5]   Arulogun, O.S., Maxwell, O.O., 2012. Perception and utilization of cervical cancer screening services among female nurses in University College Hospital, Ibadan, Nigeria. Pan Afr. Med. J. 11.

[6]   Coffey, P., Arrossi, S., Bradley, J., Dzuba, I., White, S., Group, A.C.I.A., 2004. Improving screening coverage rates of cervical cancer prevention programs: a focus on communities. Cerv. Cancer Prev. Issues Depth 4.

[7]   Conner, M., Sheeran, P., Norman, P., Armitage, C.J., 2000. Temporal stability as a moderator of relationships in the theory of planned behaviour. Br. J. Soc. Psychol. 39, 469–493.

[8]   Data, P., RI, I.K.K., 2015. Stop kanker. Infodatin. Jakarta Kementeri. Kesehat. RI.

[9]   Davis, R.E., Vincent, C., Sevdalis, N., 2015. Predictors of patients' intentions to participate in incident reporting and medication safety. J. Patient Saf. 11, 191–197.

[10]   Domingo, E.J., Noviani, R., Noor, M.R.M., Ngelangel, C.A., Limpaphayom, K.K., Van Thuan, T., Louie, K.S., Quinn, M.A., 2008. Epidemiology and prevention of cervical cancer in Indonesia, Malaysia, the Philippines, Thailand and Vietnam. Vaccine 26, M71–M79.

[11]   Farooqui, M., Hassali, M.A., Knight, A., Shafie, A.A., Farooqui, M.A., Saleem, F., Haq, N., Aljadhey, H., 2013. A qualitative exploration of Malaysian cancer patients' perceptions of cancer screening. BMC Public Health 13, 48.

[12]   Herzog, R., Álvarez-Pasquin, M.J., Díaz, C., Del Barrio, J.L., Estrada, J.M., Gil, Á., 2013. Are healthcare workers' intentions to vaccinate related to their knowledge, beliefs and attitudes? A systematic review. BMC Public Health 13, 154.

[13]   Kemenkes, R.I., 2015. Panduan Program Nasional Gerakan Pencegahan dan Deteksi Dini Kanker Leher Kanker Kanker Leher Rahim dan Payudara. Jakarta Kementrian Kesehat. Repubilk Indones.

[14]   Komariah, S., 2016. Pengaruh Konseling Behavioral Terhadap Intensi Pencegahan Kekambuhan Stroke Infark di Wilayah Kerja Puskesmas Rejoso.

[15]   Kwok, C., White, K., Roydhouse, J.K., 2011. Chinese-Australian women's knowledge, facilitators and barriers related to cervical cancer screening: a qualitative study. J. Immigr. Minor. Heal. 13, 1076.

[16]   Laili, N.R., 2016. Perilaku Perawat dalam Penerapan Edukasi Diabetes Mellitus Berbasis Theory of Planned Behavior.

[17]   Linadi, K.E., 2013. Dukungan suami mendorong keikutsertaan pap smear pasangan usia subur (PUS) di perumahan pucang gading Semarang. J. Kesehat. Reproduksi 4, 61–71.

[18]   Malek, L., Umberger, W.J., Makrides, M., ShaoJia, Z., 2017. Predicting healthy eating intention and adherence to dietary recommendations during pregnancy in Australia using the Theory of Planned Behaviour. Appetite 116, 431–441.

[19]   Nene, B., Jayant, K., Arrossi, S., Shastri, S., Budukh, A., Hingmire, S., Muwonge, R., Malvi, S., Dinshaw, K., Sankaranarayanan, R., 2007. Determinants of women's participation in cervical cancer screening trial, Maharashtra, India. Bull. World Health Organ. 85, 264–272.

[20]   Nursalam, S., 2013. Metodologi Penelitian Ilmu Keperawatan Pendekatan Praktis.

[21]   Ogilvie, G.S., Smith, L.W., Van Niekerk, D., Khurshed, F., Pedersen, H.N., Taylor, D., Thomson, K., Greene, S.B., Babich, S.M., Franco, E.L., 2016. Correlates of women's intentions to be screened for human papillomavirus for cervical cancer screening with an extended interval. BMC Public Health 16, 213.

[22]   Oon, S.W., Shuib, R., Ali, S.H., Hussain, N.H.N., Shaaban, J., Yusoff, H.M., 2011. Factors affecting health seeking behaviour among kelantanese women on pap smear screening. Proc. Econ. Dev. Res. 20.

[23]   Organization, W.H., Health, W.H.O.R., Diseases, W.H.O.C., Promotion, H., 2006. Comprehensive cervical

cancer control: a guide to essential practice. World Health Organization.

[24]   Pertiwi, N.D.E., INDRIANI, I., 2015. Faktor-faktor yang berhubungan dengan kunjungan pemeriksaan IVA/pap smear pada ibu-ibu PKK di Dusun Tajem Depok Sleman.

[25]   Rafidah, I., Wibowo, A., 2012. Pengaruh dukungan suami terhadap kepatuhan akseptor melakukan kb suntik. J. Biometrika dan Kependud. 1, 72–78.

[26]   Roncancio, A.M., Ward, K.K., Fernandez, M.E., 2013. Understanding cervical cancer screening intentions among latinas using an expanded theory of planned behavior model. Behav. Med. 39, 66–72. https://doi.org/10.1080/08964289.2013.799452

[27]   Roncancio, A.M., Ward, K.K., Sanchez, I.A., Cano, M.A., Byrd, T.L., Vernon, S.W., Fernandez-Esquer, M.E., Fernandez, M.E., 2015. Using the theory of planned behavior to understand cervical cancer screening among Latinas. Heal. Educ. Behav. 42, 621–626.

[28]   Sarayati, S., 2016. Analisis Faktor Perilaku Seksual Pada Anak SD Di SDN Dukuh Kupang II–489 Kecamatan Dukuh Pakis Kelurahan Dukuh Kupang Surabaya.

[29]   Sari, N.E.M.F., 2013. Hubungan Antara Pengetahuan, Sikap dengan Tindakan Suami Dalam Mendukung Kesehatan Maternai Istri Di Kecamatan Puspo Kabupaten Pasuruan.

[30]   Sherris, J., Castro, W., Levin, C., Dzuba, I., Arrosi, S., 2004. cervical cancer prevention issues in depth: The Case for Investing in Cervical Cancer Prevention. Natl. Lucht-en Ruimtevaartlaboratorium, Versl. en Verh.